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3528

7590

07/19/2004

STOEL RIVES LLP
900 SW FIFTH AVENUE
SUITE 2600
PORTLAND, OR 97204

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| | |
|--------------------|--------------------|
| Kitty Sisk | (Depositor's name) |
| <i>Kitty Sisk</i> | (Signature) |
| September 22, 2004 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/991,129 | 11/14/2001 | David G. Denton | 53860/6:1 | 5217 |

TITLE OF INVENTION: SYSTEM AND METHOD FOR LIGHT ACTIVATION OF HEALING MECHANISMS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------------|--------------|----------------|-----------------|------------------|------------|
| nonprovisional | YES | \$665 | \$300 | \$965 | 10/19/2004 |
| EXAMINER | ART UNIT | CLASS-SUBCLASS | | | |
| JOHNSON III, HENRY M | 3739 | 607-091000 | | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Stoel Rives LLP

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Healing Machines, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

La Conner, Washington

09/28/2004 FFANAI3 00000118 09991129

01 FC:2501

02 FC:1504

03 FC:8001

665.00 OP

300.00 OP

30.00 OP

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-4455 (enclose an extra copy of this form). **deficiencies**

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature)

(Date)

Micah D. Stolowitz

Registration No. 32,758

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